

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

10634760

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|---------------|--------------|
| TOTAL CLAIMS | 20 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 20 minus 20 = | * 0 |
| INDEPENDENT CLAIMS | 3 minus 3 = | * 0 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * 20 | Minus ** 20 | = - |
| Independent | * 3 | Minus *** 3 | = - |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 375.00 |
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL | |

| RATE | FEE |
|-----------|--------|
| BASIC FEE | 750.00 |
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL | 750 |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18= | / |
| X84= | / |
| +280= | / |
| TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

AUG. 31. 2004 11:55AM

866 751 0075

NO. 0762 P. 2/11

Docket No. 42436-19
Serial No. 10/634,760

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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AUG 31 2004

In re Patent Application of:
Jim DEHART
Serial No. 10/634,760
Filed: August 6, 2003
For: VEHICLE BARRIER

)
) Group Art Unit: 3671
) Examiner: Raymond W. Aldie
) Confirmation No. 3821
) Date: August 31, 2004
)

AMENDMENT

Mail Stop **AMENDMENTS**
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Official Action dated March 1, 2004, please amend the above
identified application as follows.

09/08/2004 EKEY11 00000002 192380 10634760

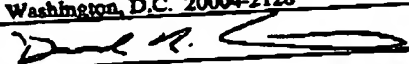
01 FC:1852 420.00 DA

NVA30392.1

PAGE 2/11 * RCVD AT 8/31/2004 11:52:12 AM (Eastern Daylight Time) * SVR:USPTO-EFXXF-1/2 * DMS:8728305 * CSID:703 880 0669 * DURATION (mm:ss):03:18

| | | | |
|---|--|------------------------|------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 10/634,760 |
| | | Filing Date | August 6, 2003 |
| | | First Named Inventor | Jim DEHART |
| | | Group Art Unit | 3671 |
| | | Examiner Name | Raymond W. Adams |
| Total Number of Pages in This Submission | | Attorney Docket Number | 742436-19 |

| | | |
|---|--|--|
| ENCLOSURES (check all that apply) | | |
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks: <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-3380 for the above identified docket number. | | |

| | |
|---|--|
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
| Firm or individual name Donald R. Studebaker, Reg. No. 32,815 Nixon Peabody LLP 401 9th Street, N.W. Suite 900 Washington, D.C. 20004-2128 | Signature  |
| Date August 31, 2004 | |

| | |
|--|--|
| CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)] | |
| I hereby certify that this correspondence is being: | |
| <input type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 | |
| <input checked="" type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) 872-9306 | |
| August 31, 2004 Date | Peaches Thomas Signature Typed or printed name |

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